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# *Asha*

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# THE CONTRIBUTIONS OF ASHA MEMBERS AND ASHA JOURNALS TO RECENT SPEECH AND HEARING LITERATURE

JACK MATTHEWS, *University of Pittsburgh\**

ERNEST J. BURGI, *University of Nebraska\**

**T**HIS survey and analysis was undertaken primarily to evaluate the relative use of ASHA publications by authors writing in the speech and hearing area and to evaluate the extent to which ASHA members contribute to the body of speech and hearing literature. The survey included articles published during the three calendar years 1958, 1959 and 1960. An attempt was made to include all English language journals which publish materials which could be considered in the general areas of speech and hearing. In the original survey of the literature, all titles (totaling 1,803) which appeared to have anything whatsoever to do with speech and hearing were taken from the journals listed below. Those journals preceded by an asterisk were examined directly, and titles of articles published in the remaining journals were taken from either *Psychological Abstracts*, *Index Medicus* or *dsh Abstracts*. Only titles which represented published articles were selected. Abstracts of articles were not included. In surveying the publication, *Speech Monographs*, for example, the published articles which dealt with speech and hearing topics were included in the survey. The abstracts of dissertations were not included.

- \*Acta Oto-Laryngologica
- \*AeroSpace Medicine
- American Annals of the Deaf
- AMA Archives of General Psychiatry
- American Industrial Hygiene Association Journal
- American Journal of Mental Deficiency
- \*American Journal of Occupational Therapy
- American Journal of Orthopsychiatry
- American Journal of Psychiatry
- \*Annals of Otology, Rhinology and Laryngology
- Archives of Disorders of Childhood
- \*Archives of Otolaryngology
- \*Asha
- \*Brain
- \*British Journal of Medical Psychology
- Bulletin of British Psychological Society
- Canadian Medical Association Journal
- Cerebral Palsy Review
- \*Crippled Child
- \*Education
- \*Exceptional Children
- \*Eye, Ear, Nose, and Throat Monthly
- Folia Phoniat
- \*Geriatrics

- \*International Journal of Group Psychotherapy
- \*Journal of Abnormal and Social Psychology
- Journal of the American Medical Association
- \*Journal of the Acoustical Society of America
- Journal of the American Psychoanalytic Assn.
- \*Journal of Clinical Psychology
- \*Journal of Comparative and Physiological Psychology
- Journal of Comparative Neurology
- \*Journal of Consulting Psychology
- \*Journal of Educational Psychology
- Journal of Experimental & Analytical Behavior
- \*Journal of Experimental Psychology
- \*Journal of Laryngology and Otology
- \*Journal of Genetic Psychology
- Journal of Rehabilitation
- Journal of Pediatrics
- \*Journal of Personality
- \*Journal of Psychology
- Journal of Psychosomatic Research
- \*Journal of Speech and Hearing Disorders
- \*Journal of Speech and Hearing Research
- \*Logos
- Lancet
- \*Language and Speech
- \*Language Learning
- \*Laryngoscope
- Medical Journal of Australia
- Medical Times
- Medical World
- Neurology
- New Zealand Medical Journal
- Nursing Outlook
- Pediatrics
- Physical Therapy Review
- Proceedings of the Royal Society of Medicine
- \*Psychological Bulletin
- Psychoanalytic Review
- \*Psychological Review
- \*Quarterly Journal of Speech
- Royal Society of Health Journal
- Radiology
- Science
- \*Speech Monographs
- \*Speech Pathology and Therapy
- \*The Speech Teacher
- Training School Bulletin
- Trans American Academy of Ophthalmology and Otolaryngology
- TransAmerican Otological Society
- U. S. Army Med. Research Laboratory Report
- \*Volta Review
- U. S. Air Force School of Aviation Medicine

\*JACK MATTHEWS is Professor and Chairman, Dept. of Speech & Dramatic Art, University of Pittsburgh and Director of the Speech Clinic, University of Pittsburgh.

\*ERNEST J. BURGI is Associate Professor and Director, Speech & Hearing Laboratories, University of Nebraska.

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A card was prepared for each article, indicating the journal in which the article was published, the names of author or authors and the title of the article. The names of the authors were checked against the *Directory* of the American Speech and Hearing Association to determine whether or not the author was a member of ASHA.

The titles were then screened to eliminate articles which, although they may have been of interest and

importance to the speech pathologist or audiologist, dealt with areas of special interest to which the audiologist or speech pathologist does not generally contribute research and writing. Titles eliminated during this screening included those representing articles restricted to various specialized areas of medicine, academic education problems of the deaf, etc. Articles concerned entirely with speech improvement and not concerned with speech therapy were also eliminated. In general, medical articles were excluded if they were concerned with specialized medical techniques or descriptive of disease process. They were included if they appeared to be concerned with effects on hearing or communication. In the main, if they dealt with diagnosis of disease, such as otitis media, they were excluded; but if the diagnosis dealt with a perceptual problem (hearing) or speech problem, they were included even though the diagnosis may have been a "medical" one. No articles published in any of the three ASHA journals were eliminated. An overwhelming majority of the articles eliminated were written by authors who were not members of ASHA. Only a few articles written either by members of ASHA or by ASHA and non-ASHA authors jointly were eliminated.

The screening process, as well as the classification of articles described later, was accomplished by examination of the titles. The authors of this paper examined each title together. Most titles could be retained or eliminated fairly easily with complete agreement by both authors. Some articles required more discussion and final arbitrary decision. Any information about the article or journal in which it appeared, possessed by either author, was utilized to help make decisions in the case of questionable articles. The authors did not make a detailed examination of any article for the purpose of categorizing it for this study.

As a result of this preliminary screening, 448 titles were eliminated from the original pool of 1,803 titles. The remaining 1,355 titles supplied the basic data which were analyzed for this report. These 1,355 titles were categorized and examined in the manner described later in this paper. It should be emphasized that the intent of this paper is to report the distribution of various types of speech and hearing articles among ASHA and non-ASHA journals and ASHA and non-ASHA authors. No attempt is made to infer or evaluate possible reasons for the results indicated.

The 1,355 titles were divided into the following six groups according to the place of publication (ASHA or non-ASHA journals) and membership or non-membership of authors in ASHA. (1) *ASHA JOURNALS, ASHA AUTHORS*. This group includes titles of articles which appeared in one of the three ASHA publications (*Journal of Speech and Hearing Research*, *Journal of Speech and Hearing Disorders* and *Asha*) and which were written solely by authors who

were members of ASHA. Both single and multiple authorships are included in this group but, in any case of multiple authorship of an article, all authors are members of ASHA. (2) *ASHA JOURNALS, ASHA AND non-ASHA AUTHORS*. This group includes titles of articles which appeared in one of the three ASHA journals and which were written co-operatively by authors who were members of ASHA and authors who were not members of ASHA. Obviously, no single authorships appear in this group. In multiple authorship articles, at least one author is a member of ASHA and at least one author is not an ASHA member. (3) *ASHA JOURNALS, non-ASHA AUTHORS*. This group includes titles of articles which appeared in one of the three ASHA journals and which were written solely by authors who were not members of ASHA. (4) *Non-ASHA JOURNALS, ASHA AUTHORS*. This group includes titles of articles which appeared in one of the non-ASHA journals and which were written by authors who were members of ASHA. (5) *Non-ASHA JOURNALS, ASHA AND non-ASHA AUTHORS*. This group includes titles of articles which were written co-operatively by ASHA and non-ASHA authors and which appeared in one of the non-ASHA journals. Any article in this group must have at least one author who is a member of ASHA and one author who is not a member of ASHA. (6) *Non-ASHA JOURNALS, non-ASHA AUTHORS*. This group includes titles of articles which appeared in one of the non-ASHA journals and which were written solely by authors who are not members of ASHA.

After the 1,355 titles were separated into the six groups described above, they were re-examined and classified according to the type of information with which the articles were primarily concerned. Each title was examined, again *jointly* by the two authors of this paper, and classified into one of five categories. Two of these categories included articles dealing with the speech area, two included articles concerned with the hearing area, and the fifth category included articles which dealt with subjects of concern to the profession of speech pathology and audiology. It was difficult to assign a "name" to each of the categories which would be descriptive of *all* the kinds of articles within the category. However, the following paragraphs list the five categories used and explain, in summary form, the type of information classified into each category.

### 1. Speech Disorders

The primary criterion for the inclusion of an article in this category is that the article deal with information in the *speech* area and be concerned in some way with *disorders* (or the abnormal). Articles concerning etiology, diagnosis, description of disorders, treatment procedures, etc., are classified into this category.

## 2. Hearing Disorders

The primary criterion for the inclusion of an article in this category is that the article deal with information in the *hearing* area and be concerned in some way with abnormal, or *disordered*, hearing. Discussions and descriptions of pathological hearing conditions, etiologies, diagnosis (including all clinical tests of hearing function), treatment procedures, etc., are included in this category.

## 3. Normal Speech and Voice Science

The title of this category probably does not adequately describe all the kinds of information which might be included here. Articles dealing with the normal speech mechanism, phonetics, descriptions and development of normative data, etc., are classified into this category.

## 4. Auditory Processes, etc.

Articles dealing with the normal hearing mechanism, development of normative data, prosthetic appliances for protection of normal hearing function, etc., are included in this category. All animal studies in the hearing area are arbitrarily included in this category, even though the ultimate objective of the study may have been to better understand some pathological condition. Studies concerned with the reaction of the normal ear to various stimuli are included here.

## 5. Professional Problems

This category includes articles dealing with the training of speech and/or hearing clinicians, program descriptions, research needs, medico-legal and compensation programs, terminology, and similar topics.

The decision to place an article into the general area of speech or hearing was almost always a simple one, made without difficulty and with complete agreement of the two authors. There were only two types of problems which served to complicate this part of the classification process, and they were easily solved. One problem arose when an article dealt with speech problems of a hard of hearing population or when an article dealt with hearing problems in a population of the speech handicapped. In these instances the article was classified on the basis of the population being studied. Thus, an article dealing with speech problems in a group of hard of hearing children would have been placed in the hearing area. On the other hand, an article concerned with evaluating the hearing problems of aphasic patients would have been placed in the speech area. Articles of the above types were not numerous. One other problem involved articles which appeared to be equally concerned with both areas. For example, such an article might be concerned with the speech and hearing problems of the mentally retarded. These articles were divided:

half of them were classified into the hearing area and half into the speech area. There were, however, very few articles of this type.

As the above category descriptions indicate, an attempt was made to develop a "clinical" type category and a kind of "basic science" category for speech and similar categories for hearing. This aspect of classification was, at times, more difficult. Most of the articles in the speech area were fairly easily separated and classified into either the category of *Speech Disorders* or the category of *Basic Speech and Voice Science*. Likewise, most of the articles in the hearing area could be separated into either *Hearing Disorders* or *Auditory Processes* without great difficulty. However, there were some articles within both the speech and hearing areas that were difficult to "sub-classify." Decisions in these cases were made by discussions between the two authors. Any information available to either of the authors of this paper concerning the nature of the article was used in arriving at a decision. Occasionally articles appearing in a "series" were split into more than one category. The following two titles provide an illustration. The first article below was classified into the *Auditory Processes* category and the second was placed in the *Hearing Disorders* category.

Miskolczy-Fodor F., "Relation Between Loudness and Duration of Tonal Pulses. II. Responses of Normal Ears to Sounds With Noise Sensation," *Journal of the Acoustical Society of America*, 32:482-486, 1960.

Miskolczy-Fodor F., "Relation Between Loudness and Duration of Tonal Pulses. III. Responses in Cases of Abnormal Loudness Function," *Journal of the Acoustical Society of America*, 32:486-492, 1960.

The nature of the classification system used resulted in articles in some fairly well defined areas of activity in the speech and hearing profession falling in different categories in this analysis. The area of hearing conservation is an example. Any article dealing with a prosthetic appliance to protect normal hearing function is found in the Auditory Processes category while another hearing conservation study dealing with public school screening tests is found in the Hearing Disorders category. Noise studies provide another example. Noise control studies dealing with methods of protecting normal hearing functions are classified under the Auditory Processes, etc., category while studies dealing with the damaging effects of noise on hearing are classified under Hearing Disorders.

No attempt was made to separate titles into classes such as experimental, theoretical, descriptive, etc. No attempt was made to assign a relative merit value to the articles or in any other way to estimate the relative importance of the articles.

Table 1 gives the number of articles in each of the five categories subdivided under journals and authors (ASHA or non-ASHA). This table is labelled "Master Data Sheet" and shows the results of the counting and

classification process. The remainder of the tables are derived from Table 1. Additional analyses, not reported in this paper, may be made from the data in Table 1.

The subsequent analysis is restricted to a semi-outline report of the published materials in speech and hearing, the publication activity of ASHA authors as

TABLE 1. MASTER DATA SHEET

*The Number and Type of Articles Published in Speech & Hearing During 1958, 1959 and 1960*

ASHA Journal, ASHA Author	
Speech Disorders	71
Hearing Disorders	30
Speech & Voice Science	30
Auditory Processes, etc.	12
Professional Problems	34
Total	177
ASHA Journal, ASHA and non-ASHA Author	
Speech Disorders	26
Hearing Disorders	11
Speech & Voice Science	6
Auditory Processes, etc.	4
Professional Problems	3
Total	50
ASHA Journal, non-ASHA Author	
Speech Disorders	19
Hearing Disorders	11
Speech & Voice Science	13
Auditory Processes, etc.	2
Professional Problems	4
Total	49
Non-ASHA Journal, ASHA Author	
Speech Disorders	80
Hearing Disorders	94
Speech & Voice Science	24
Auditory Processes, etc.	29
Professional Problems	20
Total	247
Non-ASHA Journal, ASHA and non-ASHA Author	
Speech Disorders	15
Hearing Disorders	55
Speech & Voice Science	9
Auditory Processes, etc.	23
Professional Problems	4
Total	106
Non-ASHA Journal, non-ASHA Author	
Speech Disorders	102
Hearing Disorders	225
Speech & Voice Science	108
Auditory Processes, etc.	261
Professional Problems	30
Total	726
TOTAL NUMBER OF ARTICLES	
	1,355

opposed to non-ASHA authors in these areas and the use made of ASHA journals as opposed to non-ASHA journals. No detailed discussion or evaluation of the reported data is intended.

The data in Table 2 is arranged to enable a comparison of the publishing record of ASHA journals and non-ASHA journals for the various types of articles in speech and hearing during the three-year period, 1958 through 1960. An examination of Table 2 shows that more articles are published by non-ASHA

journals than by ASHA journals in every area of speech and hearing classified in this report. In the total speech area, slightly more than twice as many articles appear in non-ASHA journals than appear in ASHA journals. About 63% of the articles in the category of Speech Disorders appear in non-ASHA journals; the remaining 37% in ASHA journals. In the category of Speech and Voice Science about 74% of the articles appear in non-ASHA journals and 26% in ASHA journals.

In the total hearing area, there are almost ten times as many articles published in non-ASHA journals as in ASHA journals. Approximately 88% of the articles in the category of Hearing Disorders appear in non-ASHA journals and 12% in ASHA journals. In the area of Auditory Processes, etc., about seventeen and one-half times as many articles appear in non-ASHA journals as appear in ASHA journals. (Approximately 94% in non-ASHA journals and 6% in ASHA journals.)

A few more articles dealing with Professional Problems appear in non-ASHA journals than appear in ASHA journals.

Of the total of 1,355 articles appearing in English language publications during the years 1958 through 1960, and classified in this paper, 276, or 20.4%, were published in ASHA journals and 1,079, or 79.6%, were published in non-ASHA journals.

TABLE 2. Number of Articles in Speech and Hearing That Appear in ASHA as Opposed to non-ASHA Journals—1958, 1959, 1960

Area	Total		
	ASHA Journals	non-ASHA Journals	All Journals
A. Speech			
Speech Disorders	116	197	313
Speech & Voice Science	49	141	190
Totals-Speech Area	165	338	503
B. Hearing			
Hearing Disorders	52	374	426
Auditory Processes, etc.	18	313	331
Totals-Hearing Area	70	687	757
C. Professional Problems			
Total Number of Articles	41	54	95
TOTALS	276	1,079	1,355

Table 3 gives a break-down of the types of articles written by ASHA authors (with no non-ASHA co-authors) and the use they make of ASHA journals as opposed to non-ASHA journals.

During the three year period, 1958 through 1960, ASHA authors published 424 articles which were included in this analysis. Of this total, 177 (approximately 42%) were published in ASHA journals and 247 articles (approximately 58%) were published in non-ASHA journals. ASHA authors writing on subjects in the speech area appear to utilize non-ASHA journals for slightly more than half of their articles. A



total of 205 articles in the speech area were published by ASHA authors. Of these, 101 (approximately 49%) were published in ASHA journals and 104 (almost 51%) in non-ASHA journals. Approximately 53% of the articles in the Speech Disorders category written by ASHA authors were published in non-ASHA journals. Approximately 44% of the publications in the Speech and Voice Science category written by ASHA authors appear in non-ASHA journals and approximately 56% in ASHA journals. It will be pointed out later, however, that ASHA authors write few articles in this category in comparison with non-ASHA authors who publish most of their articles in non-ASHA journals.

ASHA authors writing in the hearing area tend to publish most in non-ASHA journals. In the hearing area, ASHA authors published 165 articles. Of these, 42, or about 25%, appeared in ASHA journals and 123, or about 75%, in non-ASHA journals. ASHA authors writing on subjects in the Hearing Disorders category published about 3 times as frequently in non-ASHA journals as in ASHA journals. In the Auditory Processes category ASHA authors published about 2.5 times more frequently in non-ASHA journals than they did in ASHA journals.

Authors who are members of ASHA (when not co-authoring with nonmembers of ASHA) published more articles in speech than they did in hearing. Of the total of 424 articles published by ASHA authors, approximately 48% dealt with the speech area, 39%

During the three year period surveyed, ASHA authors cooperated with non-ASHA authors on a total of 156 articles which were included in this analysis. 32% of this total appeared in ASHA publications and 68% in non-ASHA publications. It is interesting to note that when ASHA authors cooperated with non-ASHA authors on articles in the speech area they published more of their articles in ASHA journals: 32 in ASHA journals as opposed to 24 in non-ASHA journals. The majority of the speech articles were in the category of Speech Disorders. When ASHA authors cooperated with non-ASHA authors on articles in the hearing area, they published in non-ASHA journals approximately five times as often as in ASHA journals. The majority of the hearing articles in this group are also in the Disorders category.

Very few articles in the Professional Problems category were jointly authored by ASHA and non-ASHA members. There was a total of seven such articles, 3 in ASHA journals and 4 in non-ASHA journals.

A comparison of Tables 3 and 4 points out that, while ASHA authors (by themselves) published more in the speech than in the hearing area, ASHA authors cooperating with non-ASHA authors published more articles in the hearing area than they did in the speech area. It should be noted here, however, that ASHA authors published a considerably greater number of articles with no non-ASHA co-author than they did with non-ASHA co-authors.

TABLE 3. Number and Distribution of Publications by ASHA AUTHORS ONLY (no non-ASHA co-authors) during 1958, 1959 and 1960

Area	ASHA Journals	non-ASHA Journals	Totals-All Journals
Speech Disorders	71	80	151
Speech & Voice Science	30	24	54
Total Speech Area	101	104	205
Hearing Disorders	30	94	124
Auditory Processes, etc.	12	29	41
Total Hearing Area	42	123	165
Professional Problems	34	20	54
TOTALS	177	247	424

dealt with the hearing area, and 13% were articles dealing with problems of the profession.

ASHA authors published more frequently in ASHA than in non-ASHA journals when writing articles in the category of Professional Problems. 54 articles were published in this area, 63% of them in ASHA journals and 37% in non-ASHA journals.

Table 4 shows the type of articles published and the distribution of articles into ASHA and non-ASHA journals when authors who are members of ASHA cooperate on publications with authors who are not members of ASHA.

TABLE 4. Number and Distribution of Publications Co-Authoring by ASHA and non-ASHA AUTHORS during 1958, 1959 and 1960

Area	ASHA Journals	non-ASHA Journals	Totals All Journals
Speech Disorders	26	15	41
Speech & Voice Science	6	9	15
Total Speech Area	32	24	56
Hearing Disorders	11	55	66
Auditory Processes, etc.	4	23	27
Total Hearing Area	15	78	93
Professional Problems	3	4	7
TOTAL NUMBER OF ARTICLES	50	106	156

Table 5 shows the published contributions to the speech and hearing field of authors who are not ASHA members. Non-ASHA authors alone published 775 articles during 1958, 1959 and 1960 which were included in this analysis. Approximately 6% of these 775 articles (49) were published in ASHA journals. Non-ASHA authors appear to be much more prolific publishers in the hearing than in the speech area. They published slightly more than twice as many articles in the hearing areas than in the speech areas. However, when their contributions to ASHA journals are

analyzed separately, the situation is reversed. Although they had few articles (49) published in ASHA journals, most of these (32) were in the speech area.

There are more articles in the Disorders categories than the Speech and Voice Science and Auditory Processes categories published in ASHA journals by non-ASHA authors. However, the total number of all articles by non-ASHA members in ASHA journals is few, as pointed out previously. When non-ASHA authors publish articles dealing with the speech area in non-ASHA journals, the number of articles dealing with clinical subjects such as disorders, diagnosis, treatment, etc. is approximately the same as the number of articles dealing with the speech and voice science topics. The situation is similar for non-ASHA authors publishing hearing articles in non-ASHA journals. There are more articles here in the Auditory Processes category than in the Disorders category, but the difference is not extreme.

Articles by non-ASHA authors dealing with problems of the profession are rarely published in ASHA journals, but appear in non-ASHA journals.

A comparison of some of the totals appearing in Tables 3, 4 and 5 provide interesting information. Of the total number of articles classified in this report (1,355) non-ASHA authors alone were responsible for approximately 57%, ASHA authors alone were responsible for approximately 31% and ASHA and non-ASHA authors cooperated jointly on the remaining 12%. If the total number of articles reported in

are obtained. Non-ASHA authors alone contributed approximately 48% to the total number of articles in the speech area, and ASHA authors alone contributed approximately 41%. (ASHA authors contributed 205 articles and non-ASHA authors contributed 242.) ASHA and non-ASHA authors cooperated to contribute the remaining 11% (56 articles). While ASHA authors alone contributed more articles to the Speech Disorders category than did non-ASHA authors alone (ASHA authors 151, non-ASHA authors 121), non-ASHA authors alone contributed a great many more articles to the Speech and Voice Science category than did ASHA authors alone (ASHA authors 54, non-ASHA authors 121). In the total hearing area, non-ASHA authors contributed considerably more than did ASHA authors. Non-ASHA authors alone contributed 499 articles, ASHA authors alone contributed 165 articles and ASHA authors cooperated with non-ASHA authors to contribute another 93 articles. Non-ASHA authors contributed considerably more articles than ASHA authors in both the Hearing Disorders and the Auditory Processes categories although the difference between the number of contributions of ASHA authors and non-ASHA is much more pronounced in the Auditory Processes category.

There was a total of 95 articles published in the category of Professional Problems, 34 by non-ASHA authors alone, 54 by ASHA authors alone and 7 authored jointly by ASHA members and authors who were not members of ASHA.

As a conclusion to this report, the most obvious observations might be summarized. During the three year period surveyed, more speech and hearing articles appeared in the non-ASHA journals surveyed than in the three ASHA journals. This was true in all categories of speech and hearing, but was more pronounced in the hearing categories. A few more articles in the category of Professional Problems were published in non-ASHA journals than in ASHA journals. ASHA authors as well as non-ASHA authors published more of their articles in non-ASHA journals than they did in ASHA journals. While the difference in number of articles authored by ASHA members and published in non-ASHA journals as opposed to ASHA journals were considerable, the difference in favor of non-ASHA journals was much greater in the case of articles authored by non-ASHA members. Non-ASHA authors published relatively few articles in ASHA journals.

Non-ASHA authors were responsible for a majority of the articles classified in this report. They contributed approximately 57% of the total. ASHA authors were responsible for approximately 31% and the remaining 12% were written by ASHA and non-ASHA authors jointly.

\*The sum of these last two percentages is greater than 100% because, in this particular analysis, the total of Table 4 is obviously counted twice—once for cooperating ASHA authors and once for cooperating non-ASHA authors.

TABLE 5. *Number and Distribution of Publications by non-ASHA AUTHORS Only (no ASHA co-authors) During 1958, 1959 and 1960*

Area	ASHA Journals	non-ASHA Journals	Totals-All Journals
Speech Disorders	19	102	121
Speech & Voice Science	13	108	121
Total Speech Area	32	210	242
Hearing Disorders	11	225	236
Auditory Processes, etc.	2	261	263
Total Hearing Area	13	486	499
Professional Problems	4	30	34
TOTAL NUMBER OF ARTICLES	49	726	775

Table 3 are added to those reported in Table 4, the resulting number of articles (580) represents all articles with which ASHA authors were involved in any way. This is approximately 43% of the total of 1,355 articles. If the total number of articles reported in Table 4 are added to those reported in Table 5, the resulting number of articles (931) represents all articles with which non-ASHA authors were involved in any way. This is approximately 69% of the total of 1,355 articles reported.\*

If the number of articles in the speech and hearing areas are analyzed separately, the following results

# PROFESSIONAL SELF-IMAGE IN SPEECH PATHOLOGY AND THERAPY

JOSEPH G. SHEEHAN\*

University of California

THE diversity in commonly employed professional labels, together with the lack of an adjective parallel to "psychological," "psychiatric," or "educational," suggest that whatever it is they're doing, those in clinical aspects of speech and hearing have no word for it. Over a period of years this field has developed a uniqueness of function which is now unquestioned; but there appears to be no comparably unique term to describe it.

This difficulty stems from the fact that the American Speech and Hearing Association is both multi-level in terms of professional qualifications and bifurcated throughout into more or less distinct areas of speech pathology or therapy on one hand and audiology on the other. Possibly the chief reason why there has been no adjective to describe a common function is that a truly common function is lacking. Separate certification areas for speech and hearing attest to this reality in terms of clinical functioning, but the bifurcation of speech and hearing is evident in research and in the nature of ethical problems as well.

Against this background, and in the light of current efforts to raise membership standards, it appears important to find out how members of the American Speech and Hearing Association view themselves and what they call themselves.

Some light may be thrown on the predominant professional self-image of ASHA members from data recently gathered in connection with a study of vocational interest patterns, activities and attitudes. For this study it became necessary to sample the membership at four fairly distinct levels. These were: (1) ASHA Fellows; (2) Ph.D. non-Fellows; (3) M.A. and M.S. members; (4) B.A. and B.S. members. Differences found in self-chosen professional title among these levels appear to be symptomatic of larger differences in professional attitude.

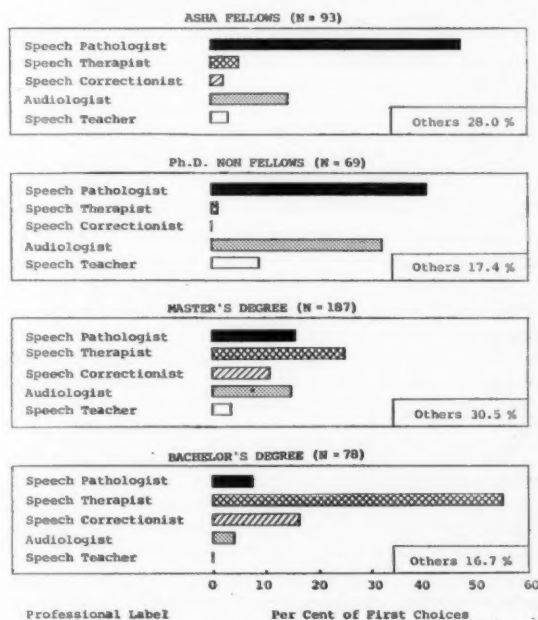
Preliminary to this larger study questionnaires were sent out to all ASHA Fellows listed in the 1958 ASHA Directory (2), and a 70 percent return was received. A report on the Fellow population, from which the present data are taken, was published in 1960 (5). After completion of the Fellow study we sent ques-

tionnaires to a randomly selected sample of 200 males and 200 female members. When ASHA Fellows turned up in the sample, they were replaced by another individual of that sex randomly selected from the 1960 Directory. With two follow-up letters we received a 76 percent return from the males and a 69 percent return from the females. Thus, a total of 400 questionnaires was sent out, and 290 were returned, making a total of 73 percent return. This return has been combined with the Fellow data making a total of 427 replies from ASHA members.

The aim of this paper was to provide the membership with descriptive data on the preferred professional identities of the above four groups so that decisions with respect to membership standards and related professional issues may be made with more systematic knowledge of some of the differences already in existence.

Contrasting percentages in preferred professional titles at the four different membership levels are presented in Figs. 1 and 2. The number of responses on which these percentages are based are contained in Fig. 1. Only first-choice professional titles were tabulated for all four membership levels.

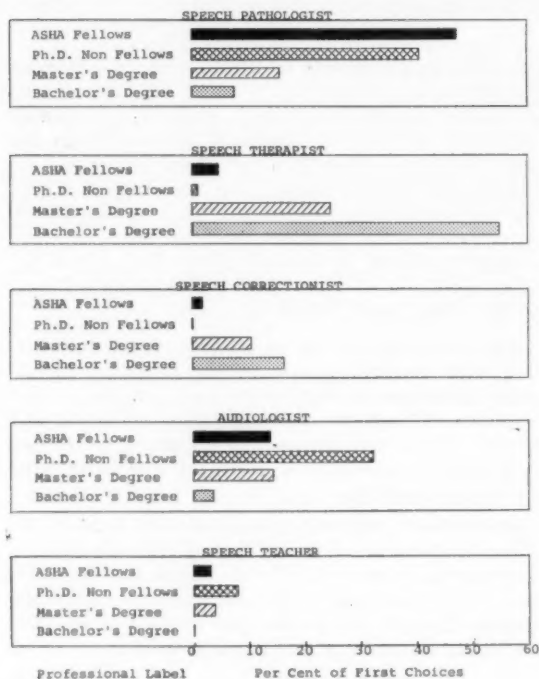
Fig. 1. The professional self-image of four levels of membership in the American Speech and Hearing Association.



\*JOSEPH G. SHEEHAN (Ph.D., Michigan, 1950) is Associate Professor of Psychology, University of California, Los Angeles. The data are drawn from a larger study on vocational interest patterns in speech and hearing personnel, which the author has undertaken with the collaboration of Robert G. Hadley of UCLA. The author was assisted in the data tabulation for this article by Loraine Lechleider of UCLA, and in the graphical presentation by William G. Williams of Purdue University. This article was written while the author was Visiting Professor in the Speech and Hearing Clinic at Purdue University.



FIG. 2. Responses of four levels of American Speech and Hearing Association membership to five suggested professional titles.



From Figs. 1 and 2, it is evident that ASHA Fellows and Ph.D. non-Fellows overwhelmingly prefer the titles "Speech Pathologist" or "Audiologist," while essentially rejecting the terms "Speech Therapist," "Speech Correctionist," and "Speech Teacher." The Bachelor's Degree group has a sharply contrasting professional self-image, with a marked preference for "Speech Therapist" and a weak secondary preference for "Speech Correctionist." It is interesting that the Master's Degree group, while also preferring "Speech Therapist," showed the most even distribution of labels and the largest percentage of "Others" choices.

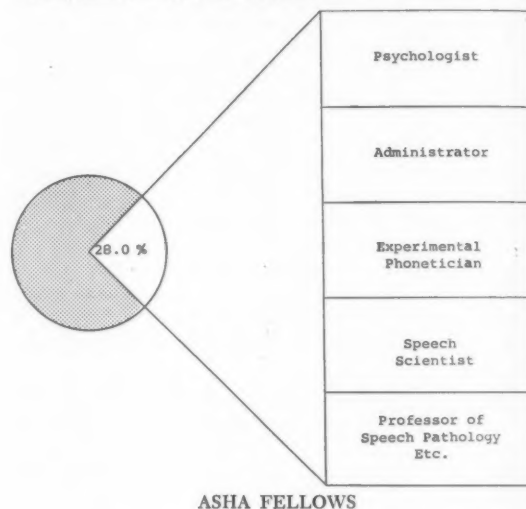
The prevalence of "Speech Therapist" as a professional title for the Master's and Bachelor's groups reported here is corroborated well by the findings of Steer et al. (4), who reported that 56 percent of public school clinicians employed "Speech Therapist," whereas 26 percent used "Speech Correctionist."

The data in Fig. 1 are rearranged in Fig. 2 to reveal more readily the responses of the four levels of membership to each professional title. An interesting contrast is provided in Fig. 2 between the preferences for "Speech Pathologist" and for "Speech Therapist" at different membership levels. They are virtual mirror images, highlighting the Ph.D.'s preference for "Speech Pathologist" and the B.A.'s preference

for "Speech Therapist" as a professional self-designation.

Figs. 3, 4, 5, and 6 portray the variety of "Other" professional titles indicated by the respondents, all of these being of "write-in" character. These write-in titles are ranked in order of frequency. It is of interest that among the ASHA Fellows, "Psychologist" although a write-in label, exceeded "Speech Teacher" which was supplied in the questionnaire.

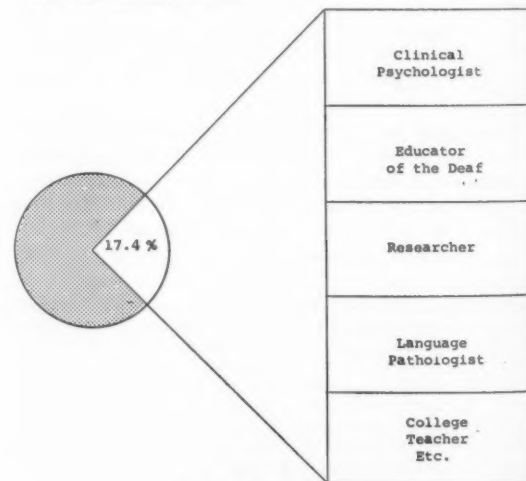
FIG. 3. "Write-in" or "Other" professional titles of ASHA Fellows, ranked in order of frequency.



ASHA FELLOWS

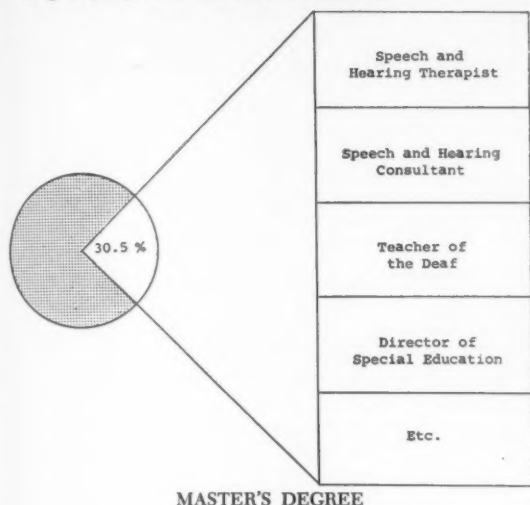
As can be seen from Fig. 3, "Administrator" was another frequent write-in title among ASHA Fellows, a result to be expected since this group, especially

FIG. 4. "Write-in" or "Other" professional titles of Ph.D. non-Fellows, ranked in order.



PH.D. NON-FELLOWS

FIG. 5. "Write-in" or "Other" professional titles of Master's Degree group, ranked in order of frequency.

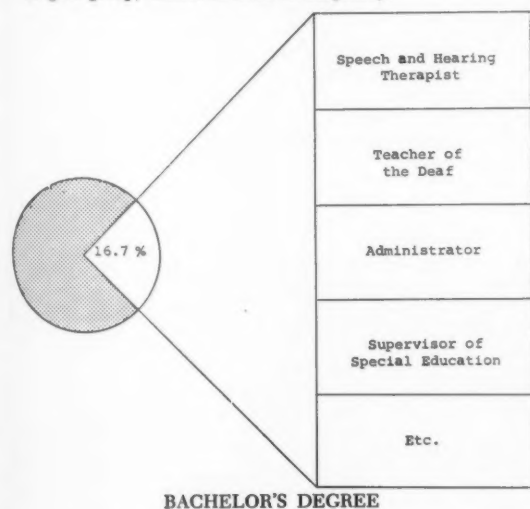


the males, reported administration to be a major work activity and too much administrative duty to be their only substantial professional complaint (5).

"Clinical Psychologist" was the favorite write-in title of the Ph.D. non-Fellow, as may be seen from Fig. 4. This title did not appear in the M.A. and B.A. levels of membership in this sample.

As may be seen from Figs. 5 and 6, "Speech and Hearing Therapist" was the favorite write-in title of the Master's Degree and Bachelor's Degree groups. The Master's group however had a greater percentage of write-ins and much more diversity in the labels. Some factors other than sample size appear

FIG. 6. "Write-in" or "Other" professional titles of Bachelor's Degree group, ranked in order of frequency.



to be operating to make this group more heterogeneous.

The popularity of "Speech and Hearing Therapist" with the M.A. and B.A. groups as a write-in suggests that some who were in the "Others" group are closer to calling themselves "Speech Therapists" than to using the other labels in Fig. 1.

#### SUMMARY

First-choice professional titles from a sample of 427 members of the American Speech and Hearing Association were tabulated separately for four levels of membership: Fellows, Ph.D. Non-Fellows, Master's Degree, and Bachelor's Degree. Resulting figures showed the following:

1. There appears to be an inverse relationship between professional level and degree of identification with the therapist role.
2. "Speech Pathologist" is the favorite self-designation of the ASHA Fellow and of the Ph.D. non-Fellow.
3. "Audiologist" is also a common designation among Ph.D. Fellows and non-Fellows.
4. "Speech Therapist" is the overwhelming favorite of B.A. and B.S. level members and the leading preference of M.A. and M.S. members.
5. "Speech Teacher" as a professional title is rejected by all levels of ASHA membership.
6. Members at higher professional levels identify themselves frequently as administrators or research scientists, while those at lower professional levels identify themselves primarily as therapists.
7. Many ASHA Fellows and Ph.D. non-Fellows identify themselves primarily as psychologists. The M.A. and B.A. level people do not so identify themselves.
8. Although there is a substantial diversification into other professional titles, there is among Ph.D.'s a clear preference for Speech Pathologist or Audiologist, and among non-Ph.D.'s a clear preference for Speech Therapist.

The implications of these findings for current issues before the speech and hearing profession were briefly indicated.

#### References

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I am sharing this experience with the readers of *Asha*, with the thought that perhaps there are many members of our profession who now and then find themselves in the sort of situation in which a suggested contribution to the American Speech and Hearing Foundation would be particularly appropriate. There are some college and university clinics in which

private fees are not charged; there are services that we sometimes render for which we are hesitant to make the usual charges; there are consultations in which we engage sometimes when we are on lecture trips, for example, and the persons whom we try to help at such times are motivated to show their appreciation and yet we do not want to charge a fee in the ordinary sense. In such circumstances the suggestion of a contribution to the American Speech and Hearing Foundation is often appreciated by those who are seeking a way to express their gratitude. It is gratifying to such persons to know that their contributions will help to make possible a program of scholarships for graduate students in speech pathology and audiology and to facilitate in other ways the continuing development of needed research, professional training, and clinical services on behalf of men, women and children with speech and hearing impairments.

Contributions may be addressed to the American Speech and Hearing Foundation, 1001 Connecticut Avenue, N.W., Washington 6, D. C. Contributions to the Foundation are deductible for income tax purposes.

Wendell Johnson

## ASHA AFFILIATES WITH IALP

In a personal letter dated July 26, 1961, Svend Smith, General Secretary of the International Association of Logopedics and Phoniatrics officially notified ASHA of the acceptance of its application for affiliation with the IALP. This action marks a forward step by ASHA in international activities of the speech and hearing profession.

The International Association of Logopedics and Phoniatrics strives to integrate educational, medical and social aspects of speech and hearing and provide services to those having disorders of voice, speech and language or any other handicap in verbal communication. One of the objectives of the IALP is to foster speech therapy in underdeveloped countries through bringing appropriate persons to IALP meetings, assisting individuals by arranging courses of study, which will enable them to do pioneer work in their own country, sending people who have appropriate training in speech pathology and audiology to the countries where services still need to be organized or expanded, and producing pamphlets, films and sound recordings for distribution in such countries.

IALP was founded by members of the medical profession and speech pathologists in 1924 to increase knowledge in pathology and therapy of speech and voice disorders, and stimulate exchange of such information between various countries. These activities inevitably came to involve hearing problems also.

To further its aims IALP holds congresses, publishes a periodical entitled "*Folia Phoniatrica*," maintains liaison with kindred specialties and assists in establishing speech and hearing organizations in countries where they do not yet exist. Another objective of IALP is to form international study groups.

"*Folia Phoniatrica*" contains articles written in English, French and German. It stresses the scientific aspects of the study of voice, speech and language, and their disorders. Contributions are from a variety of sources, including speech pathology, audiology, medicine, physics, physiology and other educational and rehabilitatory services.

The first IALP Conventions were held in Vienna in 1924, 1926 and 1928; the fifth also took place in Vienna in 1932. The eighth congress was to have been in



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Salzburg but was abandoned because of the Nazi invasion of Austria. After the war subsequent congresses have been held in Amsterdam, Zurich, Barcelona, and London. The next congress is scheduled for 1962 in Padua, Italy.

Membership in IALP can be indirect through the affiliation of a national or local society or by direct individual membership or associateship.

The present officers of IALP are as follows: President, Joan H. Van Thal, MBE, FCST, 24 Heathfield Gardens, London, NW, 11; General Secretary, Svend Smith, Ph.D., 52 Svejagervej, Hellerup, Denmark; Treasurer, Lynwood Heaver, M.D., 61 Irving Place, New York 3, N. Y. One of the Vice Presidents is Mack Steer of Purdue.

#### MEMBERSHIP IN THE NATIONAL HEALTH COUNCIL

The American Speech and Hearing Association was elected to active membership in the National Health Council on June 8, 1961. At the present time the National Council is composed of nearly eighty national health organizations.

The purposes of the Council are to aid in the promotion of health throughout the nation, through joint planning, and, where indicated, joint action by the various members of the Council, and to promote the coordination of all voluntary and governmental health efforts in the interest of efficiency and economy. The Council endeavors to stimulate joint planning and action of agencies interested in health at state and local levels through state and local health councils. Recognizing that health protection rests fundamentally upon well-conducted official public health departments, the Council aims to assist in securing and maintaining adequate official services in every community of the nation.

The National Health Council is primarily a conference ground for its organization members. It provides the means whereby these national groups can work together more effectively toward their common goal of better health for America.

The National Health Council is at the hub of the health movement. Its membership embraces all major elements of the health field. It is uniquely equipped, therefore, to help not only to increase communication between the various segments of the health movement,

but also to reach out and involve in the solution of health problems other forces whose cooperation is essential to health improvement. With a board and committees representative of the principle elements of the health field, the Council is in a position to identify areas of common concern which require cooperation, not only among health organizations, but also with many other forces in American life. To date the convening of an annual National Health Forum has been the most apparent manifestation of Council leadership in focusing attention on problems of common concern. In 1961 the National Forum had as its theme "Better Communication for Better Health." It was held in New York City in March of 1961.

The National Health Council publishes extensively on all aspects of national health. It has a national health library numbering more than 7,000 books, 1,115 journals, and 56,000 pamphlets.

The acceptance of the American Speech and Hearing Association by the National Health Council should prove beneficial to the speech and hearing profession in enhancing its relationships with related health services. It also is an indication of the national acceptance of the speech and hearing profession as a function of significant importance in the health field.

Peter G. Meek is the Executive Director of the National Health Council. His address is 1790 Broadway, New York 19, New York.



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# State Associations

## CONNECTICUT

The Speech and Hearing Association in Connecticut was organized in April, 1949, when a group of persons met in Hartford to explore the possibilities of organizing for professional purposes. In October, 1949, a founding Convention was held. The Association has met twice annually since then. In general, the fall meeting is devoted to hearing and the spring meeting is devoted to speech. From an original membership of 40 the membership has risen to 163. Convention programs have included clinics, panels, demonstrations, lectures, discussion groups, and seminars. The programs have tried to present research, new techniques, new contributions in the fields of speech pathology and audiology, teaching of the deaf, public school work, and related areas. Publications of the CSHA include a *Newsletter* and a directory of facilities in Connecticut.

On March 11, 1961, the Connecticut Association sponsored an all-day conference on childhood aphasia at Southern Connecticut, State College. Approximately 150 persons from the states of Connecticut, Massachusetts and Rhode Island were in attendance. The conference was combined with a short business meeting of the Connecticut Association.

The CSHA has instituted a program of "Honors of the Association." Recipients of certificates inscribed "In recognition of meritorious service and contribution to the organization and to the profession" were Hilda Amidon and Geraldine Garrison.

Officers of the Association are: President, Edmund McLaughlin; Vice-President, Robert J. Antanaitis (elected in March, 1961, to replace Robert F. Hejna); Treasurer, Achille Riello; Editor, David Barron; Secretary, Mary Jane Koop; Past President, Robert Hejna; Members at Large, Phyllis Carriere, Catherine Owens.

## FLORIDA

The Florida Association met for its spring conference in Lakeland on April 13, 1961. Program features were research papers, problems in speech and hearing therapy for which research provides answers, discussion of the proposed ASHA certification requirements, and business meetings.

The 1960-61 officers are: President, Laurel Schendell; Vice-President, Julia Wickersham; Secretary-Treasurer, Shirley Berger; Editor, Jack Benson; Historian, Patricia Bobsen; ASHA Delegates, M. W. Buck, D. Kenneth Wilson.

## COORDINATION IN PENNSYLVANIA

On May 19, 1961, the Pennsylvania Coordinating Committee on Hearing was formed. The group met upon invitation of the Conservation of Hearing Com-

mittee of the Pennsylvania Academy of Ophthalmology and Otolaryngology under the chairmanship of Merrill Hayes. Nineteen persons representing various professional organizations and groups interested in the hearing handicapped attended the meeting.

In addition to representatives from the Pennsylvania Speech and Hearing Association and the Pennsylvania Academy of O. and O., there were representatives from the Hearing Aid Industry Conference, Society of Hearing Aid Audiologists, Pennsylvania State Medical Society, the Pennsylvania Society for Crippled Children and Adults, The Pennsylvania Departments of Health and Public Instruction, Bureau of Vocational Rehabilitation, Veterans Administration, schools for the deaf and public school programs.

The representative from the Pennsylvania Speech and Hearing Association is a member of the executive committee of the group.

The general purposes of this Committee are to attempt to develop greater degrees of understanding among the various people with professional interest in the hearing handicapped and to develop coordinated efforts in behalf of the hearing handicapped.

The group has formed a number of working committees and will meet again to attack problems related to uniform terminology, requirements for facilities and personnel giving services to the hearing handicapped of all ages, definition of roles of special workers dealing with the hearing handicapped, and a directory of services for the hearing handicapped and legislation.

It is expected that as the work of this Coordinating Committee proceeds, the efforts of the many diverse persons interested in the welfare of the hearing handicapped will be better integrated for the greater good of the patients served.

For the present the Committee will continue under the general sponsorship of the Pennsylvania Academy of O. and O.

## MASSACHUSETTS

On May 20, 1961, the MSHA, held its annual spring convention at the University of Massachusetts campus. The program included discussions of research problems in experimental phonetics, and discussion of membership requirements for the American Speech and Hearing Association. Robert West was the guest speaker at a luncheon meeting, discussing professional responsibilities in the field of speech and hearing therapy. The MSHA has been accepted for membership in ASHA House of State Delegates. Officers of the Association are:

President: Albert W. Koch; Vice President: Inez Hegarty; Treasurer: Eleanor S. McBreen; Secretary: Pauline Ehrlich.



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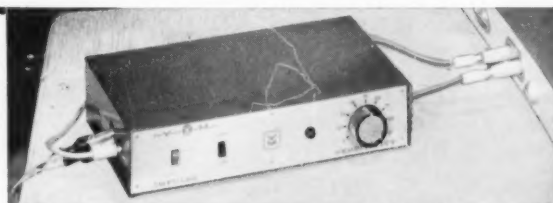
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## INDIANA

The ISHA held its annual spring meeting April 14-15, 1961, at Ball State Teachers College in Muncie, Indiana. Professional sections on the convention program included *Research and Language Development of Deaf Children*, *The Psychology of Communication*, *Practical Tips from Practical People*, *Parent Participation in Retraining*, a series of graduate papers, and *Techniques of Therapy with Stutterers*, *R-r-r-r-round Table Discussion: Stuttering and Student Teaching in Speech and Hearing Therapy*. The Association also had a banquet on the first day of the Convention. The Indiana Association has been admitted to the House of State Delegates of the American Speech and Hearing Association, and is authorized to send two delegates to the House at its next meeting.

Association officers are: President, James Shanks; Vice-President, Betty Ann Wilson; Secretary-Treasurer, John Reifsnider; Editor, Carl W. Fuller. Additional Members of Executive Council: Frank Frueth, Hilda Bartelt, Robert Showalter, Marjorie Carson.

The Association has regular committees on nominations, constitution, program, membership, and professional relations.

## OREGON

The Oregon Speech and Hearing Association, at its recent meeting at the Ocean Lake Resort in Oregon elected the following officers:

President: Kenneth Wood; First Vice President: Emery Hildebrandt; Second Vice President: Bruce Ryan; Treasurer: Hal March; Secretary: Barbara Cox; Historian: Carroll Smith; Council Members: Beril Grilley; Alice Ross; Everett Peery; Harriett Simmons; Madelyn Dutton.

William Perkins, director of the Speech Clinic at the University of Southern California, was the featured speaker at the Spring conference. He delivered two major addresses dealing with psychological aspects of speech correction.

## PENNSYLVANIA

The PSHA held its second annual convention in Philadelphia on October 21, 1961. In addition to professional-technical sessions, the Association developed further its relationships with other state speech associations, modified its constitution to meet more adequately current needs, and elected its second delegate to ASHA House of State Delegates.

## RHODE ISLAND

The Rhode Island Speech and Hearing Association was organized in February, 1951, and has been active since. RISHA has been recognized by ASHA for House of State Delegates representation. Meetings are held monthly at the Rhode Island Hospital. Present membership includes 29 ASHA members and ten non-ASHA members. Current officers are:

President: J. Barry Regan; Vice President: William O. Jones; Recording Secretary: Jane C. Scory; Treasurer: Joseph Sullivan; Corresponding Secretary: Wanda J. Hutchinson.

## TEXAS

The Texas Speech and Hearing Association had its annual convention in October, 1961, in Dallas, Texas. Of special interest to the Texas Association was the dedication of the West Texas Rehabilitation Center. Ivy Baker Priest, former treasurer of the United States, was the principal speaker at the dedication. The center was established as a nonprofit organization to help the physically handicapped become more self-sustaining. Included in the buildings are a speech and an education wing, as well as a new hydro-therapy wing.

## VERMONT

On June 8, 1961, the Vermont Speech and Hearing Association was formally organized upon the adoption of a constitution and by-laws. The Code of Ethics of the American Speech and Hearing Association was accepted as requirements for the Association. The Vermont Association has applied for admission to the House of State Delegates of ASHA.

Officers of the Association are:

President: Frank Falck; Vice President: Harriet Dunn; Secretary: Jane Wamboldt; Treasurer: J. Jay Farman; Delegate: Frank Falck.

## CERTIFICATION IN COLORADO

The state legislature of Colorado recently passed a statute, HOUSE BILL 430, which has a section that relates with special services in the schools.

In contrast to previous requirements, the new regulations will mean that a speech clinician to be employed in the public schools will no longer be required to have a degree in education. Rather, the clinician will only need training at a qualified institution. The Colorado State Department of Public Instruction will determine criteria for acceptable institutions and acceptable training program standards. It is hoped that the American Speech and Hearing Association will be consulted in the establishment of such standards.

## ALASKA

For the past three years the speech and hearing program for southeast Alaska, organized by the Department of Health and Welfare and sponsored by the Alaska Crippled Children's Association, has united with the American Hearing Society in the observance of May as BETTER HEARING MONTH by making hearing tests available. The service was originally planned to give parents an awareness of modern audiometry and audiometric techniques that might be used with school age children.

During the month of May, the Alaska Crippled Children's Association gave individual audiometric special tests in eight communities in southeast Alaska. The 431 individuals tested represents a gain of almost 200 more than were tested during the same period a year ago.

As a follow up of the testing, each individual found to have some hearing impairment was given an explanation of the kind of hearing disorder he had, consultation as to the adjustment of his problem, speech reception testing if indicated, suggestions for speech reading, and referral to a physician when indicated. The testing program was made possible by the generosity of receptionists and volunteer testers.

The Alaska Crippled Children's Association also has decided to establish as its second major project, a class for educationally deaf children in Ketchikan. The class will be designed, in the beginning, for preschool and young deaf children. After a several year trial-demonstration, the Alaska Crippled Children's Association is about to undertake an intensive service throughout areas where the need is greatest. Special emphasis will be given to hearing testing and public education regarding hearing problems, their prevention, and treatment.

During the past summer the Alaska Department of Health and Welfare, Maternal Child Health and Crippled Children's Branch, has cooperated with Sheldon Jackson, Jr. College in offering a course, **RECOGNIZING AND WORKING WITH SPEECH AND HEARING PROBLEMS OF BOYS AND GIRLS**. This course carries academic credits.

## MARYLAND

The Maryland Speech and Hearing Association has completed its first year of existence, and feels it has been a successful and interesting period. Among the accomplishments have been adoption of MSHA Constitution, acceptance into the House meetings, representation in Regional Conference of Certification and Membership Changes, and holding of a successful state association convention. New officers of the Maryland Association are:

President: Alex Kubik; Vice President: Sara E.

Conlon; Secretary: Joan Maynard; Treasurer: Paul Hadlick; Representatives: John Carter, Harriet Haskins.

## NEW JERSEY

The following are newly elected officers of NSHA: President: Michael Marge; Vice President: Jay Sanders; Treasurer: Alice Spitzner; Corresponding Secretary: Jan Slepian; Recording Secretary: Patricia Boyle; Additional Executive Committee members appointed: George Gens, James Graham and Louis Stoia.

## SOUTH DAKOTA

The South Dakota Association held an annual meeting on February 18, 1961. Although the Idaho Association is not at this time recognized for membership in the ASHA House of State Delegates, this is a goal toward which the Association is working.

Officers of the SDSHA are: President, Ethel Bridgeford; Vice-President, James Walters; Secretary-Treasurer, Dick Terry; Editor, Sharon Maris.

## TENNESSEE

The TSHA held its annual Convention March 16-17, 1961, at Memphis. The Convention was very successful and beneficial to those who attended. Ruth M. Clark highlighted the meeting as guest speaker.

Officers of the Association are: President, Lloyd Graunke; President-Elect, Lynn Daniel; Treasurer, Emily M. Goldston; Secretary, Lily F. Limbaugh; Editor, Jack Willeford.

## MICHIGAN

The Michigan Association held its fall meeting September 30, 1961 on the Central Michigan University campus. The day's program included professional papers emphasizing the block system of speech correction, and the Michigan hearing conservation program.

## LOUISIANA

The Louisiana Association held its spring meeting on March 6-8, 1961, at Louisiana State University in coordination with the 8th Annual Conference on speech and hearing disorders sponsored by the Alpha Zeta Chapter of Sigma Alpha Eta. Special features of the program included lectures and demonstrations on voice problems, a film *A Clinic in Action* by LSU clinical practice students, and social events.

Three members of the LSU group have been appointed to an ad hoc committee on regional con-



ferences on certification standards and membership requirements of ASHA.

Officers of the LSHA are: President, Carolyn Jones; Vice-President and Program Chairman, Ellery Young; Secretary-Treasurer, Frances Barnes; ASHA Delegates, Cordelia Brong and Jeannette Laguaite (alternate).

Committee chairmen are: Publications, Jeannette Laguaite; Professional Standards, Jack Rosen; Membership, Cordelia Brong; Public Relations, Dorothy West Freeman; Archives, Anna Klein; Finance, Edward Rynes.

#### ITEMS OF INTEREST ABOUT ORGANIZATIONS OTHER THAN AT THE STATE LEVEL

The Greater Kansas City Speech and Hearing Association has elected the following officers for 1961-62:

President: Donna Fox; Vice President: Dwight W. Carnahan; Secretary: Carolyn DeLapp; Treasurer: William Liston.

The Third Regional Conference of the Speech and Hearing Society of the Province of Quebec was held May 25-26, 1961, at the Queen Elizabeth Hotel, Montreal. In attendance were persons from Ontario and the Maritime Provinces. The program included sessions dealing with cerebral palsy, audiological techniques with children, problems of the brain injured and of the deaf, cleft palate, and voice. It is interesting to note the Society prints its convention program both in English and in French.

The New Orleans Speech and Hearing Center has begun publication of *NEWS*, a periodic newsletter of interest to persons associated with the Center either in a professional status or as patients. The first issue carries items regarding better hearing month, testing of young children, with White House Conference on the Aging, listing of recent professional journal articles, personal items, and so forth.



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Readers are urged to contact Bruce M. Siegenthaler, Speech and Hearing Clinic, Pennsylvania State University, University Park, Pa., Associate Editor of *STATE ASSOCIATIONS*, if they have information of pertinence to this Department.

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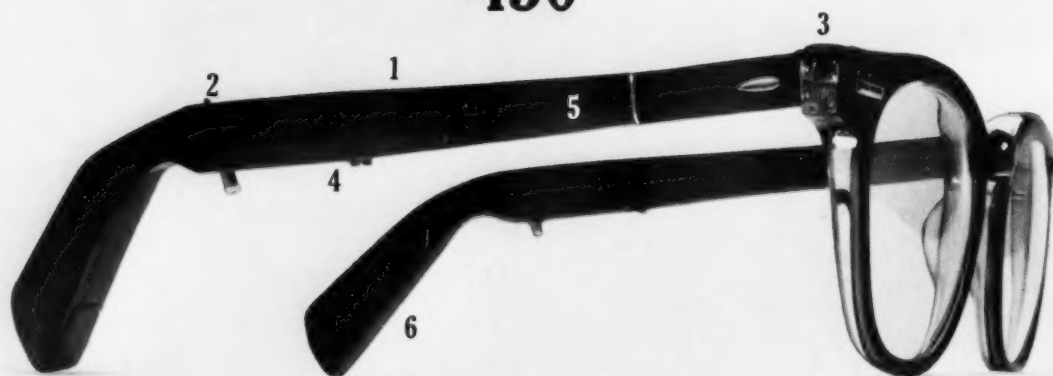
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# Clinical and Educational Materials

## FILM

**AUDITORY SCREENING FOR INFANTS**, a color film produced by the Child Growth and Development Study of the Johns Hopkins University and the Maryland State Department of Health. The purpose of the film is to stimulate interest in an auditory screening technique for infants which is not only an effective procedure for early detection of hearing impairments but which may also indicate possible abnormalities in motor coordination and mental capacity. The screening test shown in the film has been used in England for a number of years. It was developed by Sir Alex Ewing of the Department of Education of the Deaf, University of Manchester.

Anne Dougherty, a public health nurse, who studies with Professor Ewing is in charge of the screening program at Johns Hopkins and is producer of the film.

Medical officials have endorsed the test as a reliable and scientific method to screen infants and have recommended that the test be given as a part of an examination of every infant by the time he is eight or nine months old.

This 15 minute 16 millimeter film will be of interest to audiologists, speech pathologists, physicians, nurses, speech and hearing centers, health departments, medical and nursing schools.

Price of print of film is \$130. The charge for preview or rental is \$30.00 which can be applied to purchase price. Copies of the guide to film are provided.

For further information write John F. De Ley, Bureau of Preventive Medicine, Maryland State Department of Health, 301 West Preston Street, Baltimore 1, Maryland.

## BULLETINS AND BOOKLETS

**CHILDREN WITH SPEECH AND HEARING IMPAIRMENT: Preparing to work with them in schools**, Wendell Johnson, U. S. Department of Health, Education, and Welfare, Washington 25, D. C., 1959. This bulletin, which discusses the following areas in connection with speech and hearing impairment, should prove inspirational and helpful for high school and college counselors in aiding young people in choosing a career. Areas discussed are: Prevalence and definition of types of impaired speech and hearing; what can be done in the schools for children with impaired speech and hearing; the urgent need for speech correctionists; the inspiring opportunities which such a career affords; the need for research in the area schools; and the high adventure it affords. Bulletin 1959, #5 may be purchased from: Superintendent of Documents, U. S. Government Printing Office, Washington 25, D. C., price 25 cents.

**PUBLICATIONS ON THE EDUCATION AND WELFARE OF THE DEAF, 1960-1961**, a booklet containing a detailed list of reprints and articles concerning the above mentioned areas may be obtained from the American Annals of the Deaf, Galludet College, Washington 2, D.C.

**MY SPEECH WORKBOOK, Book I**, a remedial workbook for "s" and "z" sounds, Jayne Hall Parker, Interstate Printers, Danville, Illinois, 1961. The author, an experienced public school speech clinician, has tested the use of workbooks over a period of years and found them to be successful in saving the clinician's time and in enabling the parent and class teacher to help speed up "carry over." This workbook contains practice exercises to introduce each sound and to guide the parent in helping the child to re-enforce the isolated sound. The book then builds the sound from isolation to combinations with vowels, then to words, to sentences and finally to conversation. Auditory discrimination and ear training exercises are emphasized. Word lists for each have been carefully compiled from primary reading vocabulary words recommended by Arthur I. Gates, Clarence R. Stone, and Edward L. Thorndike. Words are used repeatedly through the book to insure re-enforcement.

Speech Activities are plentiful and include structured sentences, rhymes, rhyming riddles, talking drawing, speech and action, finger puppets, stories, talking writing, storytelling, question-answer, cutting-drawing, play acting, etc. Each section begins with activities suitable for use by first graders, followed by progressively more complicated materials. Important features of the book are Special Activities and Game Time, purposely generalized so that the individual working on any given sound may make application to them; The Letter to the Parent, the pages inserted for assignments, recommendations and comments, and the alphabetical list of rhymes, poems and stories increase the value of the publication.

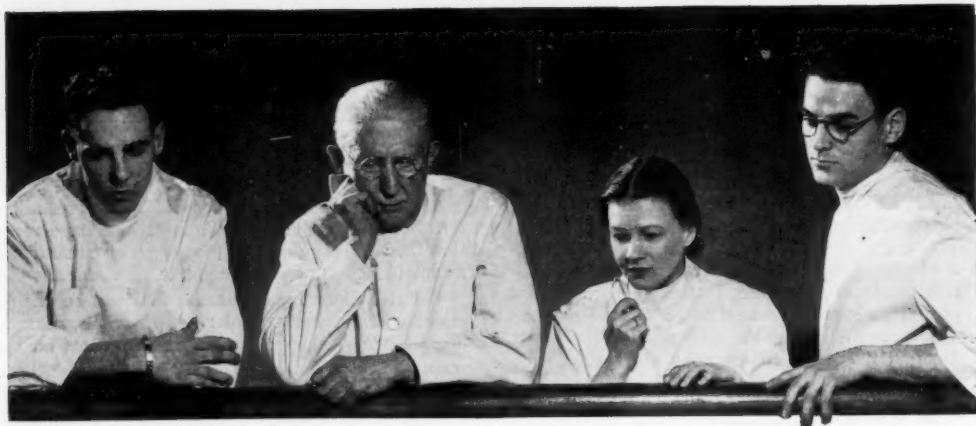
The attractively covered, interestingly illustrated, 145 page workbook with spiral binding may be purchased from Interstate Printers and Publishers, Inc., Danville, Illinois. List Price \$2.00.

**ANNOTATED BIBLIOGRAPHY OF SPEECH THERAPY MATERIALS**, Louise Goodman, Boston University, School of Education, 1961. Approximately 150 different listings are given under the following subject headings: Speech Therapy Approaches; Play, Projective Therapy; Puzzles, Toys, Commercial Games, Educational Materials; Voice; Articulation; Activity Books; Delayed Speech Program; Verse Rhymes, Jingles, Stories, Sound Games, Exercises, Songs; and Miscellaneous which includes vocabulary lists, book lists and bibliography. This bibliography was prepared by the author, a public school speech clinician, in partial fulfillment of the degree of Master of Education under the direction of Albert T. Murphy, Boston University.

The bibliography may be obtained by writing Boston University Speech and Hearing Center, Boston 15, Massachusetts and enclosing 25 cents to cover cost of handling.

Readers are urged to contact Vivian I. Roe, Department of Speech, Alabama College, Montealto, Ala., Associate Editor of **CLINICAL AND EDUCATIONAL MATERIALS** if they have information of pertinence to this Department.





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# News and Announcements

## INSTITUTIONAL

A three-year grant totaling nearly \$120,000 has been awarded to Central Institute for the Deaf, St. Louis, by the National Institutes of Health, U. S. Public Health Service, for developing a computer to be used in basic research in hearing. Jerome R. Cox, head of the C.I.D. Electro-acoustic Laboratory and Professor of Electrical Engineering at Washington University is the principal investigator on the project. According to Cox, the purpose of the computer is to give an almost instantaneous analysis of complicated electrical responses. With this analysis, while an experiment is being conducted, the investigator will be able to make decisions as to the best way to proceed, thereby increasing the efficiency and accuracy of the investigations. Eventually the computer may be used in diagnostic as well as research work.

The expansion of the Technical Department of the National Institute for the Deaf, London, England, has enabled it to offer to the public for the first time, free testing of any type of hearing aid. The tests will include: frequency responses, curves of amplification, and maximum output; measurement of battery current, and general inspection of battery contacts, cords, etc. Repairs will not be undertaken, but the owner will be given a form indicating the probable source of trouble and possible repair required. After repairs have been completed by a hearing aid center, the aid can be retested by the N.I.D.

It is anticipated that recent changes at the University of Nebraska will provide additional research opportunities for the staff and graduate students. John Wiley is working full time at the Nebraska Psychiatric Institute with a faculty appointment in the Department of Neurology and Psychiatry. Wiley's position is primarily in research, secondarily in developing a clinical program in speech, language, and hearing for the Medical School. Ernest Burgh has become Director of the Speech Clinic at the University of Nebraska.

The West Texas Rehabilitation Center at Abilene, Texas has been established as a nonprofit organization to help physically handicapped persons become more self-sustaining. A speech and education wing and a new hydro-therapy wing were formally dedicated recently. Ivy Baker Priest was the principal speaker at the dedication program of this \$100,000 addition to the physical plant of the center. Mary M. Everson is Head of the Speech and Audiology Departments at the Center.

The L. B. Spake Hearing and Speech Department of the University of Kansas Medical Center will hold its 12th Postgraduate Course in Hearing and Speech on February 23 and 24, 1962. The speakers will be: John Irwin on "Articulation Therapy, the Problems" and "Articulation Therapy, the Processes"; Elise Hahn on "Direct, Non-Direct, and Indirect Speech Therapy" and "Methods in Communication Therapy for Varying Age Levels"; and Harriet Green Kopp on "Adaptation of a Silent Reading Program for the Deaf" and "The Development of Arithmetic Skills and Problem Solving Techniques." Registration should be addressed to the: Postgraduate Division of Medicine, University of Kansas Medical Center, Kansas City 3, Kansas.

## ORGANIZATIONAL

The Ninth International Congress of Linguists, under Einar Haugen, President, will be held in Cambridge, Massachusetts, at Harvard University and the Massachusetts Institute of Technology, August 27 to 31, 1962. Persons interested in receiving the official announcement of the Congress should write to the Secretariat, 9th International Congress of Linguists, Room 14N-307, M.I.T., Cambridge, Mass.

The Information Office of the President's Committee on Employment of the Physically Handicapped frequently gets requests from national and business magazines for articles on employment of the handicapped. The Office requests leads on stories of employers who have successfully hired handicapped persons. Leads on any human interest stories of employment of the handicapped can be sent to the N.E.P.H., Washington 25, D.C.

At the opening session of the Central States Speech Association in Chicago on April 14, 1961, two of the "Outstanding Young Teachers of Speech Awards" went to Illinois speech correctionists—Sandra Bump, Morton Public Schools, and Thomas Timmis, Savanna Public Schools. This was the first time that these awards were presented to speech correctionists. The fact that only eleven persons were chosen to receive the awards in the thirteen-state-area indicates the evaluation placed by the association on the award.

Herold Lillywhite, Director, Crippled Children's Division, University of Oregon Medical School, and Kenneth O. Johnson, Executive Secretary, participated as members of a panel on Speech and Hearing at the Thirty-Ninth Annual Scientific and Clinical Session of the American Congress of Physical Medicine and Rehabilitation held in Cleveland, Ohio, August 30, 1961. In addition to the ASHA representatives, Jerome S. Tobis, Professor and Chairman, Department of Physical Medicine and Rehabilitation, New York Medical College and Frederic J. Kottke, Professor and Chairman, Department of Physical Medicine and Rehabilitation, University of Minnesota Medical School represented the American Congress of PM and R. The purpose of the meeting was to expose and discuss the issues of conflict between physiatrists and speech pathologists and audiologists. Clearly the basic problem is that the physiatrist feels he is legally obligated to provide professional supervision for the speech and hearing specialist. In addition, he feels he is professionally qualified to write prescriptions in many cases of speech and hearing disability. The 250-300 physiatrists attending the meeting were advised that speech pathologists and audiologists could not accept the physiatrists' notion of his role in the speech and hearing field.

## PERSONALS

The President of Austria has awarded the Cross of Honor, First Class, for Science and Art to Emil Froeschels for his work in speech pathology in this country and in Austria. The decoration, which is legally restricted to fifteen living scientists, was presented at the Austrian Consulate in New York on June 7, 1961. Froeschels is Honorary President of the Austrian Society for Speech Education and a Fellow of ASHA.

Readers are urged to contact Dorothy D. Craven, Speech Clinic, University of Maryland, College Park, Md., Associate Editor of NEWS AND ANNOUNCEMENTS, if they have information of pertinence to this Department.



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# Forum

## CHANGES IN AMENDING PROCESS

May I utter a word of protest concerning the process in changing the constitution of ASHA. The reason for this protest centers around the manner in which the change in certification was presented to the membership. First, the change was presented with little notification; second, it was presented without pro and con arguments on the change; and third, it was presented amidst a large number of amendments. The last reason reminds me of a political election in which the voters of a state were required to vote on fifty-two amendments. Surely little information could precede an intelligent and deliberative vote.

In order to overcome these difficulties the amending process should be changed in the following manner:

1. Any change in the constitution must be preceded by an announcement in *Asha* one month prior to the distribution of ballots.
2. Each amendment must carry a pro and con argument relative to the adopted change in the constitution in the announcement as printed in *Asha*.
3. No more than five amendments may be presented to the membership for consideration at any one time.

If these proposals had been in effect prior to the vote for changes in certification, better results would have been achieved: First, more members would have voted on the amendments. Second, more informed votes would have been balloted. Third, the Association would have saved a considerable amount of money that has been expended in promoting and propagandizing the move to "white coat" the association. The well expressed ideas of Van Riper, Bryngelson, and others would have challenged many minds if these men had been allowed to express themselves before the balloting. Let us hope that their advice is heeded. Let us enforce our old requirements wherein sufficient provisions exist to provide for high standards.

E. J. J. Kramar  
University of Southwestern Louisiana  
Lafayette, Louisiana

## COMMENT

I most heartily agree with Carmen C. Dixon's opinion (*Asha*—Aug. 1961, Forum, p. 265) that Regional Meetings might be more far reaching than the annual National Meeting. I was inspired by the National Meeting in Los Angeles in 1955, but was unable to attend the 1960 meeting. Most of the school budgets do not include long and expensive conferences. I feel many of the younger clinicians would receive much inspiration if they could attend one of these sessions, with the Masters in our profession at the helm.

Personally, I feel that anyone who is seriously interested in the field of Speech and Hearing will want to obtain a Master's Degree as soon as possible. Learning is a lifetime quest and does not stop with any one degree. Research will open up doors in our profession in the coming decades. . . . We must be aware of these opportunities in order to better serve our children.

Thousands of Public School Speech and Hearing Specialists have not applied for ASHA certification because of the complicated and long drawn-out manner in which it is obtained. I have had the application papers for several years and every time I look at them, I stop and find I have just filed them away again.

Not in every case, but in many cases, the personnel who supervise or coordinate the Speech and Hearing Programs in the Public Schools have had little or no background for this very important position. I feel this is a weak link in the Public School Program. It is very frustrating to have to ask for this and that from someone who cannot visualize the needs of the Speech and Hearing Specialist.

In many of the California colleges and universities, provision is made for the students to do their practice teaching in Speech and Hearing in the public schools. They become familiar with the routine, heavy case loads, registers, parent counseling, etc. This is excellent preparation.

I thoroughly enjoyed the fine comprehensive report on the Public School Speech and Hearing Services. I hope every Administrator and supervisor will read it carefully.

Martha Yattaco Walker  
Winters, California

## COMPETENCE IN SPEAKING

I'd like to document the article "The Speech Clinician's Role in the Community" (*Asha*—July 1961, p. 209-210) which calls for ASHA to add to its basic certification requirements competence in speaking.

As a parent in a suburban community as well as a member of ASHA, I have been repeatedly asked why our school board should have hired a speech correctionist who himself has faulty speech. Other specialists in the school system tell me that the teachers don't take seriously anything the correctionist says, much less the parents.

Until ASHA can demand that a clinician exhibit proper speech I suggest that local speech and hearing societies be encouraged by ASHA to make speech classes available for members who need improvement.

Elizabeth Lundberg  
Chappaqua, New York

Readers are urged to contact Walter Amster, VA Hospital, Coral Gables, Florida, Associate Editor of FORUM, if they have information pertinent to this Department.





Mr. Roy E. Hartbauer is shown using an Allison Audiometer at the Audiology Clinic directed by the Department of Otolaryngology, School of Medicine, College of Medical Evangelists, at the White Memorial Hospital, Los Angeles, California.

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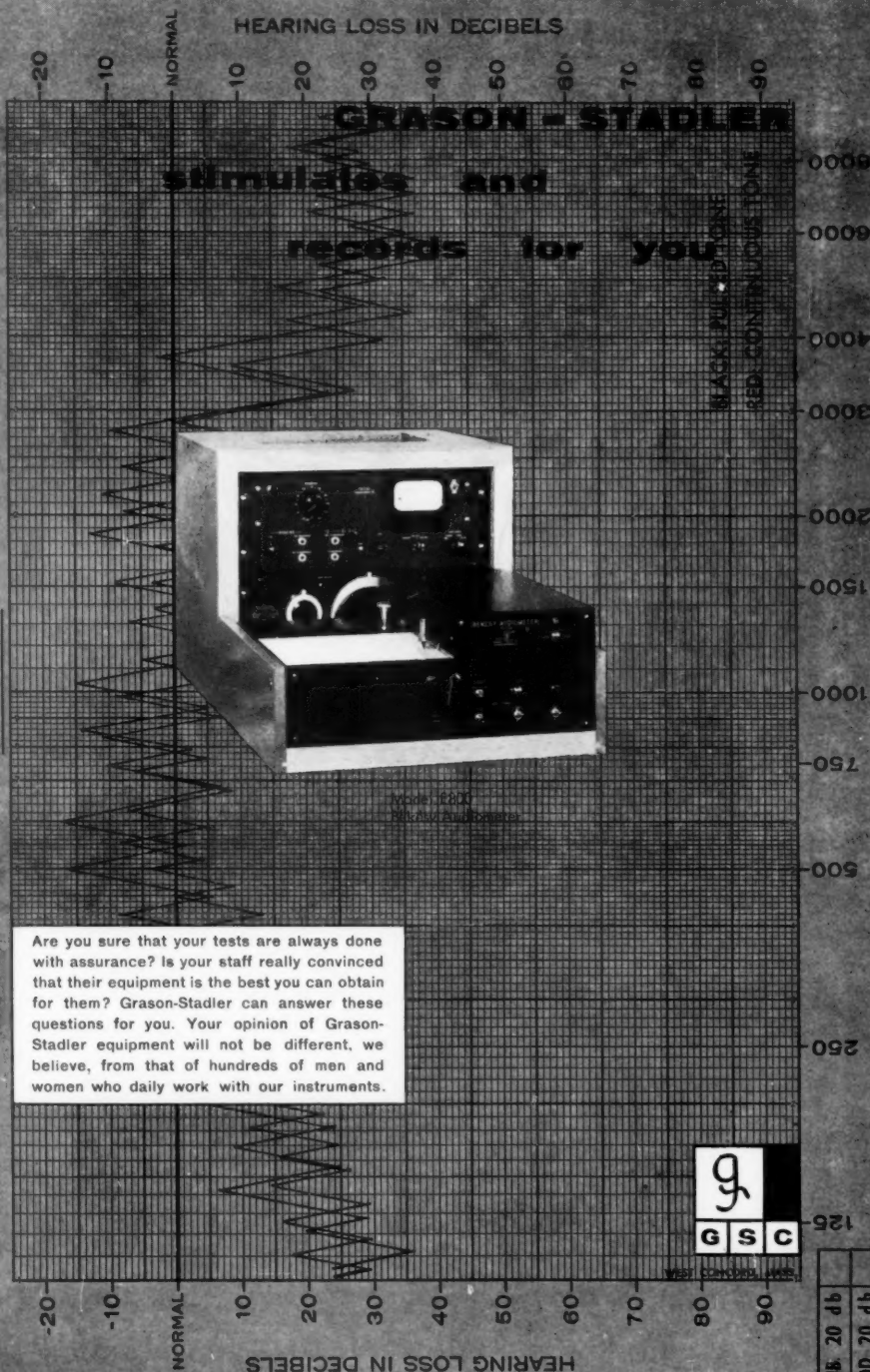
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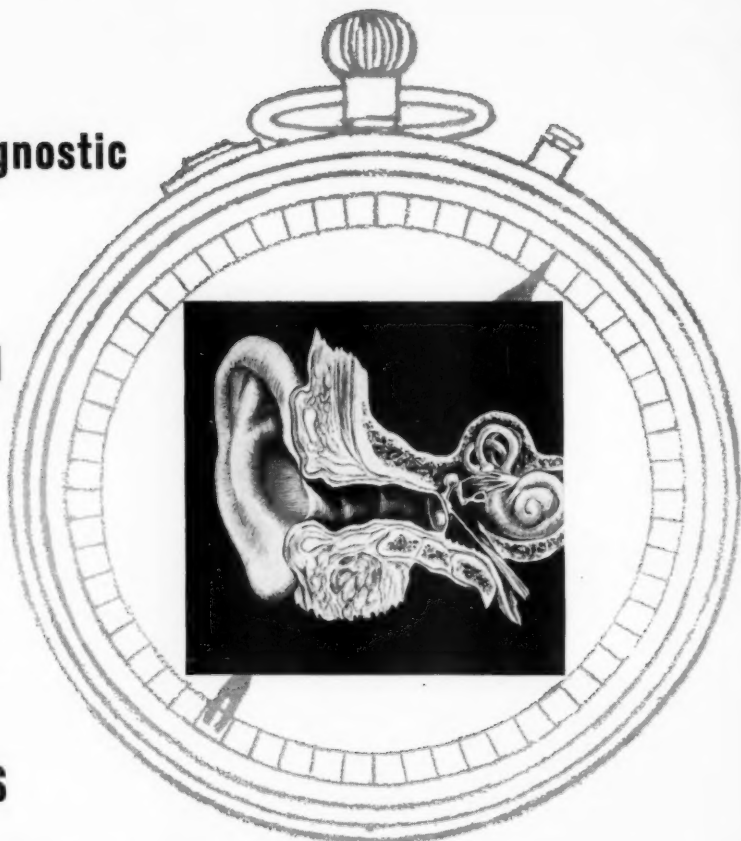
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